Submitting Electronic Claims and Receiving Electronic Payment

March 27, 2018

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2. Why should I "go electronic"?
3. How to enroll in and use EDI, ERA, and EFT
4. How to submit claims for free using Office Ally
5. Tips for electronic claims submission
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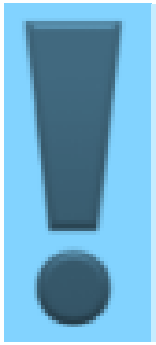
Terminology

Electronic Data Interchange (EDI)

EDI:

- Enables you to submit claims and receive payments electronically for faster processing and payment
- Allows paperless billing and payment for healthcare services and supplies
- Automates many types of routine inquiries



Blue Shield of California does not charge providers to submit EDI claims

Electronic Data Interchange (EDI)

You can submit claims two ways with EDI:

Today's focus

- **Through an EDI clearinghouse (such as Office Ally)**
  - If your office submits fewer than 1,500 claims per month.
  - Office Ally offers free setup and claim submission, as well as electronic remittance advice for Blue Shield, and a free practice management system.
  - Visit the *Claims* pages on Provider Connection for a list of other approved EDI clearinghouses.
- **Through secure file transfer protocol (SFTP)**
  - If your office submits more than 1,500 claims per month.
  - May enable you to reduce or avoid monthly fees or transfer delays, and provides same-day or next-day access to Blue Shield's detailed EDI acknowledgment reports.
  - May need dedicated IT staff to update and maintain EDI software.
  - You are responsible for ensuring your compliance with HIPAA dataset and transaction regulations, and for compatibility with payer edits.

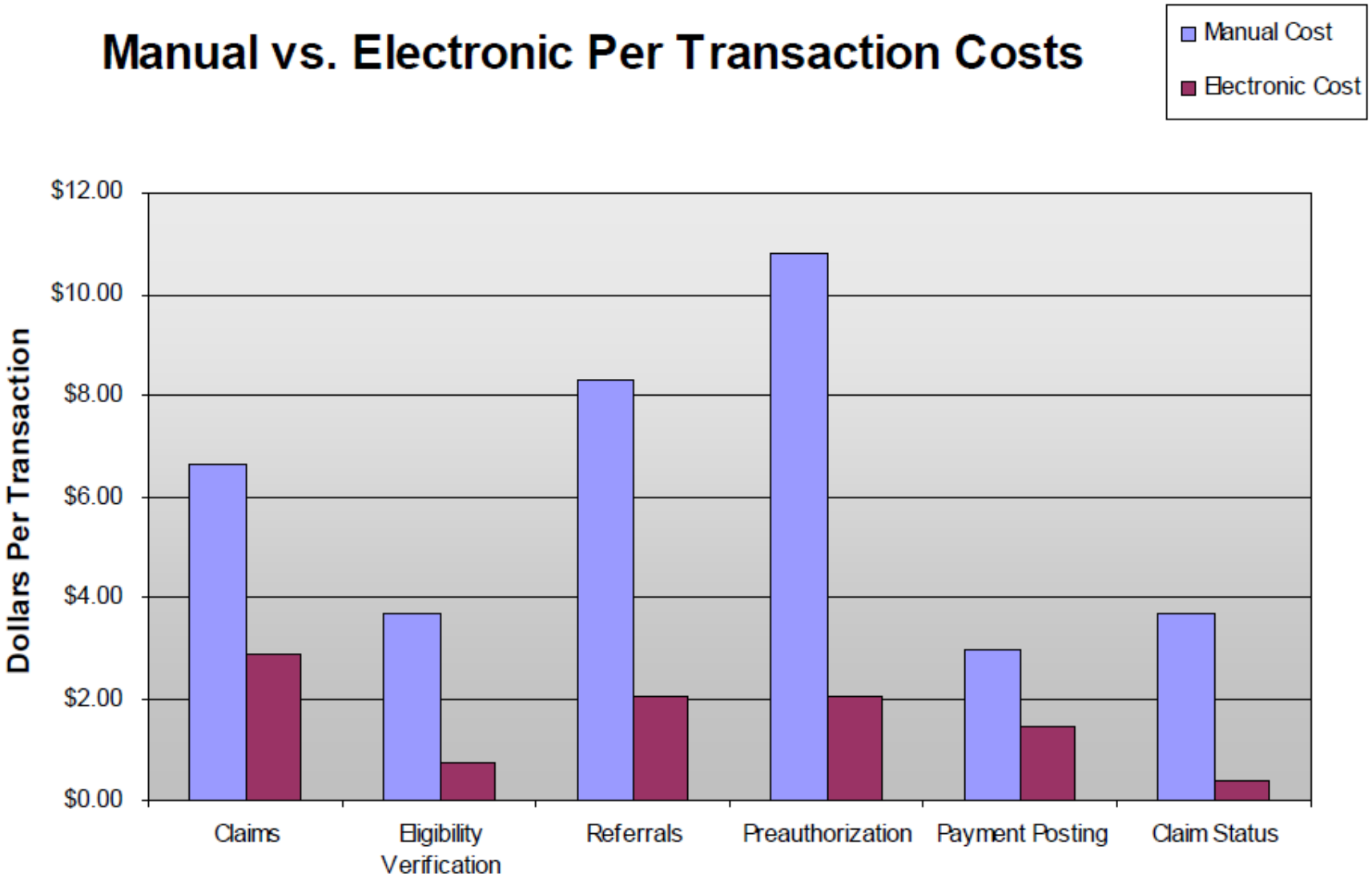
ERA and EFT

- **ERA** – Electronic Remittance Advice
  - ERA is an electronic transaction that enables providers to receive claims payment information electronically. Files are transmitted in the HIPAA-mandated ASC X12 835 5010 A1 format.
  - Providers are required to use best efforts to receive ERA files or view Explanation of Payment (EOP) using Blue Shield's Provider Connection website (unless their provider contract states otherwise).
  - Providers can receive ERA through a clearinghouse such as Office Ally, once enrolled.
  - ERA will automatically post payments into most Practice Management Systems, which saves time versus manually posting paper EOBs.

- **EFT** – Electronic Funds Transfer
  - With EFT, electronic claims payments are received through direct deposit of funds into a designated bank account based on information submitted by the provider.
  - You can enroll in EFT on Blue Shield's Provider Connection website.

Why should I “go electronic”?

Benefits of going electronic



Electronic Transaction Savings Opportunities for Physician Practices, Milliman, 2006

Benefits of going electronic

annual savings from implementing electronic transactions

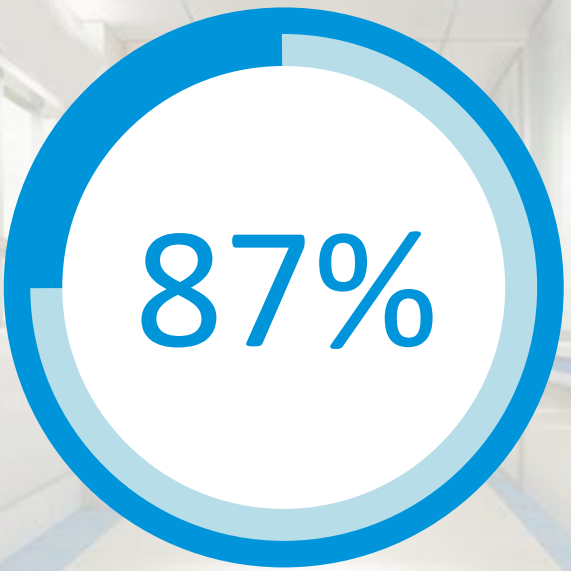
Source: Electronic Transaction Savings Opportunities for Physician Practices, Milliman, 2006

Benefits of going electronic

- Improved accuracy
- Faster claims processing
- Improved security
- Reduced paperwork
- Improved cash flow
- Easier to track payments

Even providers with limited technical capabilities can submit electronic claims!

Benefits of going electronic

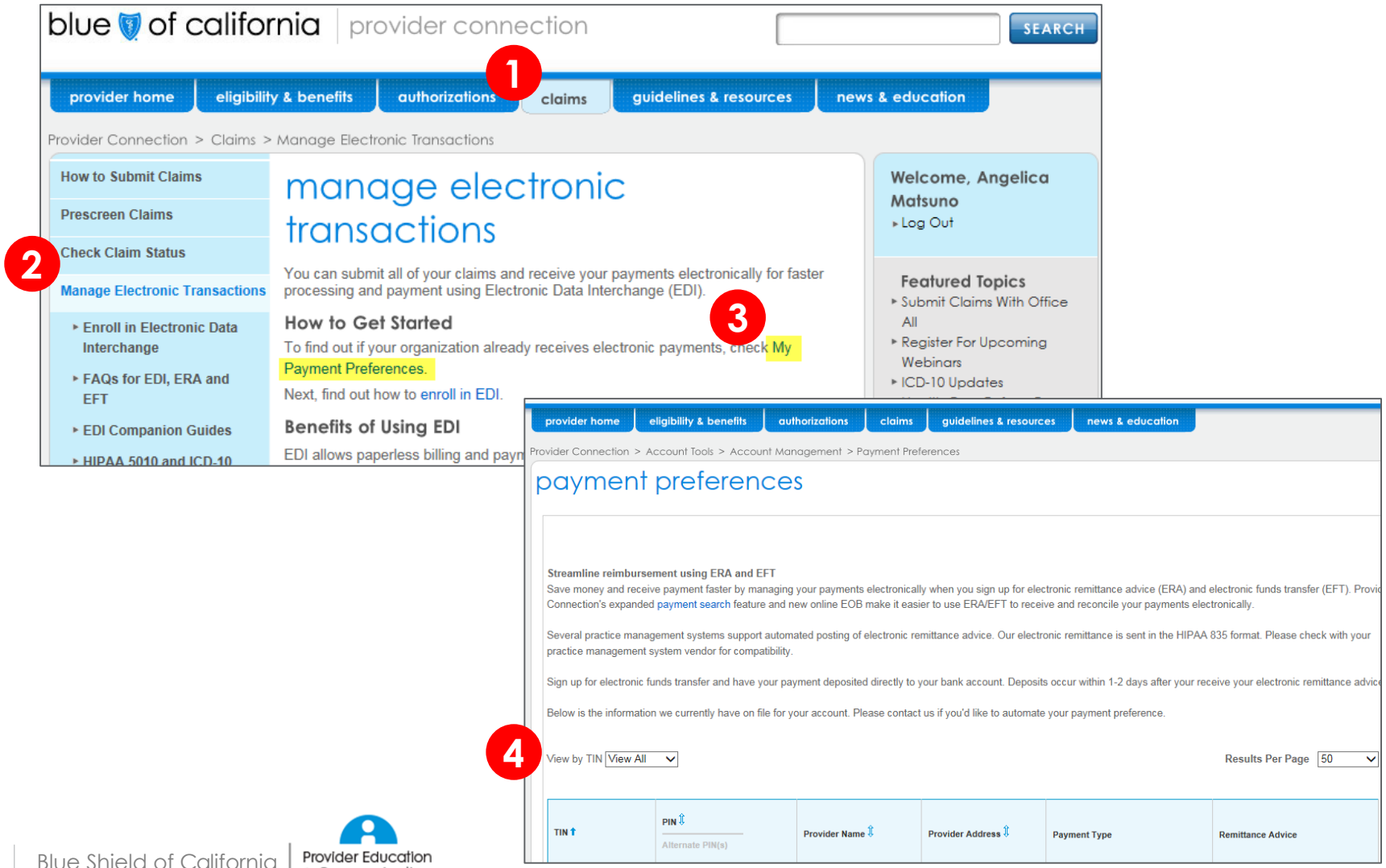


of paper claims stall due to missing or mismatched content

How to enroll in and use EDI, ERA, and EFT

Getting started

First, find out if your office is enrolled in ERA/EFT – you will need your Taxpayer Identification Number (TIN).



Technical requirements for EDI

To enroll in and use EDI, ERA, and EFT, you will need:

- A working computer and an Internet connection
- An email address
- A business bank account and your routing number
- To be registered as a user on Blue Shield's Provider Connection website
- A National Provider Identifier (NPI) registered with Blue Shield
- A Blue Shield Provider Identification Number (PIN)

PIN questions and answers

Question	Answer
How do I find out my PIN, or how do I get one?	To find your Provider Identification Number (PIN) or to secure one, please call Provider Information and Enrollment at (800) 258-3091 and select option 3.
Can several physicians in a practice use the same PIN?	It depends on whether you are billing for a group or for several individual providers. A provider group has a unique National Provider Identifier (NPI) and Tax ID number corresponding to the group. If you are billing for a group, you would use that NPI and Tax ID. If you are billing for individual physicians, you would use each physician's Provider Identification Number (PIN).

Enroll in EDI

To enroll in EDI

1. If you are not currently submitting electronic claims, choose one of our approved EDI clearinghouses to submit claims for free.
2. Complete and return the ePayments Provider Authorization form to authorize Blue Shield to send ERA to a third party on your behalf, and designate a business account for direct deposit of your claims payments.
    a) Return completed form by fax, Attention: eBusiness Data Exchange (530) 351-6150, or by postal mail to: eBusiness Data Exchange, 4700 Bechelli Lane, Redding, CA 96002.
3. Contact the selected EDI clearinghouse to enroll and begin exchanging electronic transactions.

Next steps

- Blue Shield will send confirmation of your enrollment in electronic payments within 10 business days. ERA is available within one business day and funds are deposited within two business days after your claims finalize.
- Contact the EDI help desk at edi_bsc@blueshieldca.com or (800) 480-1221 if you have questions or need help completing your forms.

Enroll in ERA and EFT

To enroll in ERA and EFT

There are two ways to add direct deposit to your account, or to enroll only in direct deposit:

1. Complete and return the ePayments Provider Authorization form
   a) by fax, Attention: eBusiness Data Exchange
   (530) 351-6150, or by postal mail to: eBusiness Data Exchange, 4700 Bechelli Lane, Redding, CA 96002.

OR

2. Enroll online by following the instructions on the EDI EFT and ERA Online Enrollment Instructions form.

Next steps

- There is a 10-day period required after enrollment in EFT to verify bank account information and to allow a smooth transition from paper checks to EFT.
- You will be contacted via email, phone, or fax to notify you that your EFT enrollment is complete.

How to submit claims for free using Office Ally demonstration

Tips for electronic claims submission

Tips for electronic claims submission

Common reasons for electronic claims rejection

- Missing or inaccurate member information (e.g., baby name for newborn visit, no subscriber record on file for subscriber number)
- Member not eligible for the dates of services
- Missing provider information (e.g., no NPI)
- BlueCard claim submitted to wrong Blue plan
- Federal Employee Program (FEP) institutional claim submitted to Blue Shield in error
- Missing or omitted diagnosis codes
- Use of retired, incorrect, or invalid codes such as CPT, HCPCS, and diagnosis
- Duplicate claims submission within seven days

Tools to help you submit accurate claims

Prescreen claims with Clear Claims Connection (C3)

- C3 simulates claim auditing by enabling you to enter different codes on mock claims and immediately see allow/review/disallow recommendations.
- C3 enables providers to transparently view Blue Shield's current claim auditing rules, edit recommendations, and clinical rationales from nationally recognized sources.
- Learn how to prescreen claims with this handy reference tool.
- Prescreen claims with C3.

Search the Claims Fee Schedule to find out about Blue Shield allowances

- This applies to professional services only. The fees in this schedule are not applicable to facility-related charges.
- Search the Claims Fee Schedule.

Review policies and guidelines as necessary

- Learn more about rules for payment, including time frames for submitting, contesting, or adjusting a claim.

Summary checklist – going electronic

When you are ready to enroll in EDI

- ❑ Visit the *Claims* tab on Provider Connection and select *Manage Electronic Transactions*.
- ❑ Select an EDI clearinghouse (such as Office Ally, which offers free practice management software, and free setup and training).
- ❑ Complete and submit the ePayments Provider Authorization form.
- ❑ Enroll with the EDI clearinghouse you selected.
- ❑ Complete clearinghouse training, as necessary.

When you are ready to submit claims

- ❑ Search the Claims Fee Schedule (aka Professional Fee Schedule), if needed.
- ❑ Review Blue Shield policies and guidelines, if needed.
- ❑ Submit claims electronically through the clearinghouse.

Resources

Blue Shield contacts

For:	Call:
• EDI or Office Ally questions	**(800) 480-1221** or email EDI_BSC@blueshieldca.com
• Claims • Authorizations • Billing • Benefits • Eligibility • Technical issues with website	Provider Customer Service Help Line: **(800) 541-6652**
• Network confirmation • Contract questions	Provider Information and Enrollment: **(800) 258-3091**
• Pharmacy Call Center	**(800) 535-9481**
• BlueCard eligibility and benefits	**(800) 676-BLUE**
• BlueCard claims	**(800) 622-0632**

Have feedback on this webinar, or want to suggest a topic?
Email us at provider_education@blueshieldca.com.

Additional clearinghouse contacts

These Blue Shield-approved vendors can arrange free setup for electronic submission for Blue Shield claim and remittance transactions.

- **Office Ally**

  Apply online at www.officeally.com or call (360) 975-7000, and press 3.

  Free claim submission[1] and electronic remittance advice receipt for Blue Shield and over 5,000 other payer claims. Free practice management system[2] with integrated low-cost electronic medical records available.

- **TriZetto Provider Solutions**

  Online at www.trizettoprovider.com or call (800) 969-3666.

  Free claim submission[1] and electronic remittance with Blue Shield[2]. All-payer EDI services are available at an additional cost.

- **Ability Network**

  Online at www.abilitynetwork.com or call (888) 550-5637.

  Free claim submission[1] and electronic remittance advice receipt for Blue Shield claims. All-payer EDI services are available at an additional cost.

[1] Providers are responsible for their organization's internet connectivity.
[2] Offer for free practice management system is provided by vendor only and is not offered by Blue Shield.

EDI optimization summary

What is EDI optimization?

EDI enables you to submit claims and receive payments electronically for faster processing. EDI allows paperless billing and payment for healthcare services and supplies and automates many types of routine inquiries.

Why is EDI optimization worthwhile?

- Improved accuracy
- Improved security
- Quicker payment
- Faster claims processing
- Reduced paperwork for your office
- Easier to track payments

What does EDI mean to providers?

- Effective 1/1/2018, Blue Shield requires providers to submit claims that do not have a medical record attached electronically (unless their provider contract specifically states otherwise).
- Additionally, Blue Shield requires providers to receive claims payments by electronic funds transfer and receive electronic remittance advice (unless their provider contract specifically states otherwise).